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Elizabeth and Mark Lambert
47 Horseshoe Circle
Barkhamsted, CT 06063
February 5, 2009

Insurance and Real Estate Committee
Room 2800, Legislative Office Building
Hartford, CT 06106

SB 301
Dear Committee Members:

My name is Beth Lambert, and I am the President of Connecticut Families for Effective Autism Treatment (CT FEAT). Connecticut FEAT is a non-profit organization staffed by parent volunteers who provide families with information on effective treatment for their children. We are strong supporters of Applied Behavior Analysis.

I would like to share with you the personal experience of my family with the use of Applied Behavior Analysis, ABA, with our autistic son, Eric.

First, ABA does not cure autism. Second, if not done under properly qualified supervision it will yield mixed results, some potentially negative. But done properly, supervised by a board certified behavior analyst, the improvement in behavior and skills of an autistic person can be no less than breathtaking.

My son began intensive ABA therapy when he was 4 ½ years of age. On the autistic spectrum, my son is considered severe. At 4 ½ he was not toilet trained, did not speak, and was unable to participate in simple social experiences such as eating dinner with the family. Wild and uncontrollable tantrums were a part of daily life. The quality of our family life was poor. Today at 15 our son is still severely autistic, but he is fully independent in toileting, bathing, dressing, and making his bed. He not only joins the family for dinner but also sets the table and assists in clearing the table. Each week Eric bowls at the local bowling alley and has been included in birthday party invitations as well. He is not conversational but is able to tell us his wants and needs. The tantrums, anger and fear that so punctuated his early life are rare. At 4 years of age many, even family members, found him sometimes frightening to be around. Today, at 15 he is certainly not loquacious, but family, friends and teachers find him affable and a pleasure to have around. The individually tailored intervention programs targeted at the skills and behaviors our son needed, with carefully gathered behavioral data guiding the therapists as to when interventions worked and when they did not have made an incalculable improvement in the quality of his life and of that of our family. We can say unequivocally that the behaviors our son demonstrated routinely at 4 would have required us to institutionalize him years ago without the gains he has made from ABA.

Properly implemented and supervised ABA quantifies what works and points to the type of intervention that will be successful, then even quantifies when it is successful. It makes teaching a quantifiable science.

ABA should be practiced by experienced professionals. We would never consider allowing medical procedures for our children be performed by inexperienced or unqualified persons. Likewise we should not entrust the practice of behavioral science to those unqualified and untrained.

ABA will not cure autism. It is the best tool we have for living with a terribly debilitating condition.

I would like to recognize and thank the ABA professionals at CREC's River Street Autism Program at Coltsville and River Street School for their dedication and professionally disciplined teaching that has meant so much to my son and my family.

My husband and I very much appreciate the investment the education system and people of Connecticut have made in my son. But over his lifetime, that investment will be paid back by the contribution (if humble) that he will be able to make as well as the control of the extraordinary expense of total care that has been avoided.

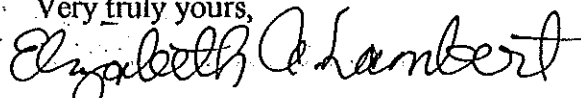
As effective as ABA has been for our son, we cannot help but wonder about what skills he would have developed if he had started ABA at 2 years of age. Developmental specialists have demonstrated that a child's ability to learn language skills are most successful at ages two through 5 and is unlikely to learn language skills after age 10. The best results come from the earliest possible intervention with ABA. Insurance coverage of ABA will make this possible. This will not cure, but will unlock the minds and skills of many autistic children.

The struggles my family has endured because of autism are too extensive to discuss in this short time slot. Families confronted with a child with this diagnosis are faced with, first, coming to terms with the tremendous challenge, next navigating a path not clearly delineated to effective treatment, and finally finding a way to pay for it. I believe this bill has the means to help families struggling with autism in a profound way.

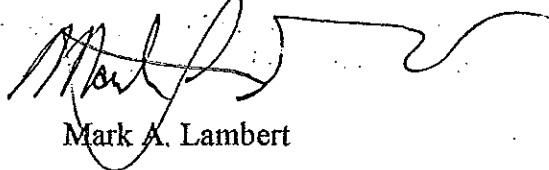
This bill will certainly cost insurance companies more money and have a measured impact on insurance premiums overall. But our children will soon be adults. The cost of caring for adults with autism is best mitigated when they are small children. In a time when we are clearly passing on more and more of the cost of the present to our children, this is a chance to improve the quality of life of autistic people and their families, to increase the viability of the lives of autistic people and mitigate some of the costs our children will bear.

On behalf of Connecticut FEAT, families struggling with autism across Connecticut, and my family, we strongly urge your support for this bill. Thank you.

Very truly yours,



Elizabeth A. Lambert



Mark A. Lambert